

Procter & Gamble – I.P. Division

MAY 10 2005

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CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**TO: Official Patent Application Related Correspondance- United States Patent and Trademark Office**

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 (Signature)**FROM: Bridget Harris for Jerry J. Yetter, Esq.** (Typed or printed name of person signing Certificate)

Fax No. 513/627-0375

Phone No. 513/627-2996

Listed below are the item(s) being submitted with this Certificate of Transmission:**

Number of Pages Including this Page: /2

- 1) PTO/SB/17 – Fee transmittal – in duplicate
- 2) PTO/SB/30 – RCE transmittal – in duplicate
- 3) Amendment – 7 pgs.
- 4) .
- 5) .

Inventor(s): Van Greet

S.N.: 10/731,937

Filed: 12/10/2003

Docket No.: CM1976C

Comments:

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PTO/SB/30 (08-03)

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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/731,937
	Filing Date	12/10/2003
	First Named Inventor	Peter M.M. Van Geert
	Group Art Unit	1734
	Examiner Name	Melvin C. Mayes
	Attorney Docket Number	CM1976C
	Confirmation Number	6673

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.
 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

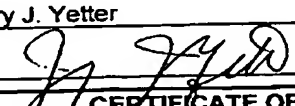
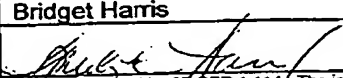
- Submission required under 37 C.F.R. § 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
 - ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
 - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - ☐ Other _____
 - Enclosed
 - ☒ Amendment/Reply

05/17/2005 SHINASS1 00000087 162480 10731937
 - ☐ Affidavit(s)/Declaration(s)

01 FC:1801 790.00 DA
 - ☐ Information Disclosure Statement (IDS)
 - ☐ Other -
- Miscellaneous**
 - ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
 - ☐ Other _____
- Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **16-2480**.

 - ☒ RCE fee required under 37 C.F.R. § 1.17(e)
 - ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
 - ☐ Suspension of action fee under 37 C.F.R. § 1.17(i)
 - ☐ Other -

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME (Print/Type)	Jerry J. Yetter	Reg. No. (Attorney/Agent) 26,598
SIGNATURE		DATE May 10, 2005
CERTIFICATE OF MAILING OR TRANSMISSION		
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NAME (Print/Type)	Bridget Harris	
SIGNATURE		DATE May 10, 2005

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(Revised for P&G use 9/3/2004)

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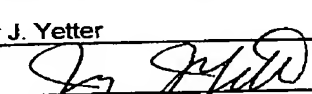
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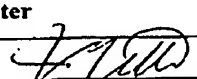
PTO/SB/17 (12-04)

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	10/731,937
	Confirmation Number	6673
	Filing Date	12/10/2003
	First Named Inventor	Peter M.M. Van Greet
	Examiner Name	Melvin C. Mayes
	Art Unit	1734
TOTAL AMOUNT OF PAYMENT (\$ 910.00)		Attorney Docket No. CM1976C

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																	
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		5. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120)</td> <td><input type="checkbox"/> [120]</td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td></td> <td></td> </tr> <tr> <td>RCE under 37 CFR 1.17(e)</td> <td></td> <td>\$ 790</td> </tr> </tbody> </table>		Fee Description		Fee Paid	Extension for reply within 1 st month	(\$120)	<input type="checkbox"/> [120]	Extension for reply within 2 nd month	(\$450)	<input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020)	<input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590)	<input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160)	<input type="checkbox"/>	Information Disclosure Statement fee	(\$180)	<input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>	37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50)	<input type="checkbox"/>	Non-English specification	(\$130)	<input type="checkbox"/>	Notice of Appeal	(\$500)	<input type="checkbox"/>	Filing a brief in support of an appeal	(\$500)	<input type="checkbox"/>	Request for oral hearing	(\$1,000)	<input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	<input type="checkbox"/>	Other:			RCE under 37 CFR 1.17(e)		\$ 790
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4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$) <input type="checkbox"/>			Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																																		
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jerry J. Yetter	Telephone	(513) 627-2996
Signature		Date	May 10, 2005
	Registration No. 26,598		

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